

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000008484

**FILED**  
**Feb 27, 2022**  
**Secretary of State**  
**8393400296CC**

**Entity Name:** FACULDADE EINSTEIN INC.

**Current Principal Place of Business:**

RUA DO PACO 15 ITINGA  
LT 15 MONASTÉRIO UNIÃO MISSIONÁRIA FRANCISCANA  
LAURO DE FREITAS ITINGA, BAHIA 42738215

**Current Mailing Address:**

RUA DO PACO 15 ITINGA  
LT 15 ORDEM DOS FRADES MENORES CONVENTUAIS  
LAURO DE FREITAS ITINGA, BAHIA 42738215 BR

**FEI Number:** 81-2040315

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

RODRIGUES, ANDRES A SR.  
150 SE 2ND AVENUE  
1110  
MIAMI, FL 33131 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PRESIDENTE  
Name COHEN , ROBERTO PHD  
Address RUA DO PACO 15 ITINGA  
LT 15 ORDEM DOS FRADES  
MENORES CONVENTUAIS  
City-State-Zip: LAURO DE FREITAS ITINGA BAHIA  
42738215

Title VICE PRESIDENT  
Name ROBERTO COHEN, ZIGMUND  
ZIEGLER PHD  
Address AVENIDA PRAIA DE GUARUJA, 865 -  
LOTE 11  
ESQUINA GUARUJA BUSINESS -  
LOJA 02 - VILAS DO ATLANTICO  
GABINETE ABACIAL  
City-State-Zip: LAURO DE FREITAS 42707080

Title DIRECTOR, RECTOR  
Name TORRES, JOSE AUGUSTO MACIEL  
PHD  
Address RUA DO URUGUAY  
21 MARES  
City-State-Zip: SALVADOR 40.445 - 040

Title TREASURER  
Name PERES, JOAO PAULO DOJAME PHD  
Address AV. OTAVIO MANGABEIRA 2401  
SHOPPING ATELIE PLACE SALA 7  
City-State-Zip: SALVADOR 41830050

Title EXECUTIVE SECRETARY  
Name FARIA OFMCONV., ROBERTO  
RAMIRES PHD  
Address RUA DO PACO 15 ITINGA  
LT 15 ORDEM DOS FRADES  
MENORES CONVENTUAIS  
City-State-Zip: LAURO DE FREITAS ITINGA BAHIA  
42738215

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ROBERTO COHEN

**PRESIDENT**

**02/27/2022**

Electronic Signature of Signing Officer/Director Detail

Date